APPLICATION DATA SHEET

Application Information

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| Application Number:: | |
|----------------------------------|--|
| Filing Date:: | · |
| Application Type:: | Regular |
| Subject Matter:: | Utility |
| Suggested Classification:: | |
| Suggested Group Art Unit:: | |
| CD-ROM or CD-R?:: | None |
| Number of CD Disks:: | |
| Number of Copies of CDs:: | |
| Sequence Submission?:: | |
| Computer Readable Form (CRF)?:: | No |
| Number of Copies of CRF:: | |
| Title:: | GUIDE WIRE AND METHOD OF MANUFACTURING THE GUIDE WIRE |
| Attorney Docket Number:: | 018961-067 |
| Request for Early Publication?:: | No . |
| Request for Non-Publication?:: | No |
| Suggested Drawing Figure:: | |
| Total Drawing Sheets:: | 7 |
| Small Entity?: | No |

| Latin Name:: | |
|----------------------------------|---|
| Variety Denomination Name:: | |
| Petition Included?:: | No |
| Petition Type:: | |
| Licensed US Govt. Agency:: | |
| Contract or Grant Numbers:: | |
| Secrecy Order in Parent Appl.?:: | No |
| | |
| Applicant Information | |
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | Japan |
| Status:: | Full Capacity |
| Given Name:: | Hiraku |
| Middle Name:: | |
| Family Name:: | MURAYAMA |
| Name Suffix:: | |
| City of Residence:: | |
| State or Province of Residence:: | |
| Country of Residence:: | |
| Street of Mailing Address:: | c/o Terumo Kabushiki Kaisha, 150, Maimaigi-cho |
| City of Mailing Address:: | Fujinomiya-shi |

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State or Province of Mailing Address:: Shizuoka-ken

Initial 03/18/04

| Country of Mailing Address:: | Japan |
|--|---|
| Postal or Zip Code of Mailing Address:: | |
| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | Japan |
| Status:: | Full Capacity |
| Given Name:: | Katsuro |
| Middle Name:: | |
| Family Name:: | MISHIMA |
| Name Suffix:: | |
| City of Residence:: | |
| State or Province of Residence:: | |
| Country of Residence:: | |
| Street of Mailing Address:: | c/o Terumo Kabushiki Kaisha, 150, Maimaigi-cho |
| City of Mailing Address:: | Fujinomiya-shi |
| State or Province of Mailing Address:: | Shizuoka-ken |
| Country of Mailing Address:: | Japan |
| Postal or Zip Code of Mailing Address:: | |

Correspondence Information

Correspondence Customer Number:: 21839

Phone Number:: (703) 836-6620

Fax Number: (703) 836-2021

Representative Information

Representative Customer Number:: 21839

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing

Date::

Foreign Priority Information

Country:: Application Number:: Filing Date:: Priority

Claimed::

Japan 2003-74313 03/18/03 Yes

Assignee Information

Assignee Name:: Terumo Kabushiki Kaisha

Street of Mailing Address:: 44-1, Hatagaya 2-chome

City of Mailing Address:: Shibuya-ku

State or Province of Mailing Address:: Tokyo

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing

Address::